

Fill in this information to identify your case:

United States Bankruptcy Court for the:

DISTRICT OF VERMONT

Case number (if known) Chapter 7

☐ Check if this an amended filing

Official Form 201

Voluntary Petition for Non-Individuals Filing for Bankruptcy

06/22

If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write the debtor's name and the case number (if known). For more information, a separate document, *Instructions for Bankruptcy Forms for Non-Individuals*, is available.

1. Debtor's name	Join, Inc.	
2. All other names debtor used in the last 8 years Include any assumed names, trade names and doing business as names	DBA Cheese & Wine Traders DBA Cheese and Wine Traders DBA Cheese Traders DBA Cheese Traders and Wine Sellers	
3. Debtor's federal Employer Identification Number (EIN)	47-1277466	
4. Debtor's address	Principal place of business 1186 Williston Road South Burlington, VT 05403 Number, Street, City, State & ZIP Code Chittenden County	Mailing address, if different from principal place of business P.O. Box, Number, Street, City, State & ZIP Code Location of principal assets, if different from principal place of business 1212 Williston Road (some assets) South Burlington, VT 05403 Number, Street, City, State & ZIP Code
5. Debtor's website (URL)	www.cheeseandwinetraders.com	
6. Type of debtor	<input checked="" type="checkbox"/> Corporation (including Limited Liability Company (LLC) and Limited Liability Partnership (LLP)) <input type="checkbox"/> Partnership (excluding LLP) <input type="checkbox"/> Other. Specify:	

Debtor **Join, Inc.**
Name

Case number (if known)

7. Describe debtor's business

A. Check one:

- ☐ Health Care Business (as defined in 11 U.S.C. § 101(27A))
- ☐ Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B))
- ☐ Railroad (as defined in 11 U.S.C. § 101(44))
- ☐ Stockbroker (as defined in 11 U.S.C. § 101(53A))
- ☐ Commodity Broker (as defined in 11 U.S.C. § 101(6))
- ☐ Clearing Bank (as defined in 11 U.S.C. § 781(3))
- ☒ None of the above

B. Check all that apply

- ☐ Tax-exempt entity (as described in 26 U.S.C. §501)
- ☐ Investment company, including hedge fund or pooled investment vehicle (as defined in 15 U.S.C. §80a-3)
- ☐ Investment advisor (as defined in 15 U.S.C. §80b-2(a)(11))

C. NAICS (North American Industry Classification System) 4-digit code that best describes debtor. See <http://www.uscourts.gov/four-digit-national-association-naics-codes>.4452**8. Under which chapter of the Bankruptcy Code is the debtor filing?**

Check one:

- ☒ Chapter 7
- ☐ Chapter 9
- ☐ Chapter 11. Check **all** that apply:

A debtor who is a "small business debtor" must check the first sub-box. A debtor as defined in § 1182(1) who elects to proceed under subchapter V of chapter 11 (whether or not the debtor is a "small business debtor") must check the second sub-box.

- ☐ The debtor is a small business debtor as defined in 11 U.S.C. § 101(51D), and its aggregate noncontingent liquidated debts (excluding debts owed to insiders or affiliates) are less than \$3,024,725. If this sub-box is selected, attach the most recent balance sheet, statement of operations, cash-flow statement, and federal income tax return or if any of these documents do not exist, follow the procedure in 11 U.S.C. § 1116(1)(B).
- ☐ The debtor is a debtor as defined in 11 U.S.C. § 1182(1), its aggregate noncontingent liquidated debts (excluding debts owed to insiders or affiliates) are less than \$7,500,000, **and it chooses to proceed under Subchapter V of Chapter 11**. If this sub-box is selected, attach the most recent balance sheet, statement of operations, cash-flow statement, and federal income tax return, or if any of these documents do not exist, follow the procedure in 11 U.S.C. § 1116(1)(B).
- ☐ A plan is being filed with this petition.
- ☐ Acceptances of the plan were solicited prepetition from one or more classes of creditors, in accordance with 11 U.S.C. § 1126(b).
- ☐ The debtor is required to file periodic reports (for example, 10K and 10Q) with the Securities and Exchange Commission according to § 13 or 15(d) of the Securities Exchange Act of 1934. File the *Attachment to Voluntary Petition for Non-Individuals Filing for Bankruptcy under Chapter 11* (Official Form 201A) with this form.
- ☐ The debtor is a shell company as defined in the Securities Exchange Act of 1934 Rule 12b-2.

☐ Chapter 12**9. Were prior bankruptcy cases filed by or against the debtor within the last 8 years?**

- ☒ No.
- ☐ Yes.

If more than 2 cases, attach a separate list.

District	_____	When	_____	Case number	_____
District	_____	When	_____	Case number	_____

Debtor **Join, Inc.**
Name

Case number (if known)

10. Are any bankruptcy cases pending or being filed by a business partner or an affiliate of the debtor?
- ☒ No
☐ Yes.

List all cases. If more than 1, attach a separate list

Debtor Relationship
District When Case number, if known

11. Why is the case filed in this district?
- Check all that apply:
- ☒ Debtor has had its domicile, principal place of business, or principal assets in this district for 180 days immediately preceding the date of this petition or for a longer part of such 180 days than in any other district.
- ☐ A bankruptcy case concerning debtor's affiliate, general partner, or partnership is pending in this district.

12. Does the debtor own or have possession of any real property or personal property that needs immediate attention?
- ☐ No
☒ Yes. Answer below for each property that needs immediate attention. Attach additional sheets if needed.
- Why does the property need immediate attention?** (Check all that apply.)
- ☐ It poses or is alleged to pose a threat of imminent and identifiable hazard to public health or safety.
What is the hazard? _____
- ☐ It needs to be physically secured or protected from the weather.
- ☒ It includes perishable goods or assets that could quickly deteriorate or lose value without attention (for example, livestock, seasonal goods, meat, dairy, produce, or securities-related assets or other options).
- ☐ Other _____
- Where is the property?** **1186 Williston Road**
South Burlington, VT, 05403-0000
Number, Street, City, State & ZIP Code
- Is the property insured?**
- ☐ No
- ☒ Yes. Insurance agency **Acadia Insurance Company**
Contact name _____
Phone _____

Statistical and administrative information

13. Debtor's estimation of available funds
- Check one:
- ☐ Funds will be available for distribution to unsecured creditors.
- ☒ After any administrative expenses are paid, no funds will be available to unsecured creditors.

14. Estimated number of creditors
- | | | |
|--|--|--|
| <input checked="" type="checkbox"/> 1-49 | <input type="checkbox"/> 1,000-5,000 | <input type="checkbox"/> 25,001-50,000 |
| <input type="checkbox"/> 50-99 | <input type="checkbox"/> 5001-10,000 | <input type="checkbox"/> 50,001-100,000 |
| <input type="checkbox"/> 100-199 | <input type="checkbox"/> 10,001-25,000 | <input type="checkbox"/> More than 100,000 |
| <input type="checkbox"/> 200-999 | | |

15. Estimated Assets
- | | | |
|---|--|--|
| <input type="checkbox"/> \$0 - \$50,000 | <input type="checkbox"/> \$1,000,001 - \$10 million | <input type="checkbox"/> \$500,000,001 - \$1 billion |
| <input type="checkbox"/> \$50,001 - \$100,000 | <input type="checkbox"/> \$10,000,001 - \$50 million | <input type="checkbox"/> \$1,000,000,001 - \$10 billion |
| <input type="checkbox"/> \$100,001 - \$500,000 | <input type="checkbox"/> \$50,000,001 - \$100 million | <input type="checkbox"/> \$10,000,000,001 - \$50 billion |
| <input checked="" type="checkbox"/> \$500,001 - \$1 million | <input type="checkbox"/> \$100,000,001 - \$500 million | <input type="checkbox"/> More than \$50 billion |

Debtor

Join, Inc.

Name

Case number (if known)

16. Estimated liabilities

☐ \$0 - \$50,000

☐ \$50,001 - \$100,000

☐ \$100,001 - \$500,000

☒ \$500,001 - \$1 million

☐ \$1,000,001 - \$10 million

☐ \$10,000,001 - \$50 million

☐ \$50,000,001 - \$100 million

☐ \$100,000,001 - \$500 million

☐ \$500,000,001 - \$1 billion

☐ \$1,000,000,001 - \$10 billion

☐ \$10,000,000,001 - \$50 billion

☐ More than \$50 billion

Debtor **Join, Inc.**
Name

Case number (if known)

Request for Relief, Declaration, and Signatures

WARNING -- Bankruptcy fraud is a serious crime. Making a false statement in connection with a bankruptcy case can result in fines up to \$500,000 or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

**17. Declaration and signature
of authorized
representative of debtor**

The debtor requests relief in accordance with the chapter of title 11, United States Code, specified in this petition.

I have been authorized to file this petition on behalf of the debtor.

I have examined the information in this petition and have a reasonable belief that the information is true and correct.

I declare under penalty of perjury that the foregoing is true and correct.

Executed on **April 5, 2024**
MM / DD / YYYY

X /s/ John N. Howard
Signature of authorized representative of debtor

Title **President and Majority Shareholder**

John N. Howard
Printed name

18. Signature of attorney

X /s/ Michael B. Fisher
Signature of attorney for debtor

Date **April 5, 2024**
MM / DD / YYYY

Michael B. Fisher
Printed name

Fisher Law Offices, PLLC
Firm name

45 Lyme Road, Suite 205
Hanover, NH 03755
Number, Street, City, State & ZIP Code

Contact phone **(603) 643-1313**

Email address **fisher@mbfisherlaw.com**

VT

Bar number and State

Fill in this information to identify the case:

Debtor name Join, Inc.

United States Bankruptcy Court for the: DISTRICT OF VERMONT

Case number (if known) _____

☐ Check if this is an amended filing

Official Form 202

Declaration Under Penalty of Perjury for Non-Individual Debtors

12/15

An individual who is authorized to act on behalf of a non-individual debtor, such as a corporation or partnership, must sign and submit this form for the schedules of assets and liabilities, any other document that requires a declaration that is not included in the document, and any amendments of those documents. This form must state the individual's position or relationship to the debtor, the identity of the document, and the date. Bankruptcy Rules 1008 and 9011.

WARNING -- Bankruptcy fraud is a serious crime. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$500,000 or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Declaration and signature

I am the president, another officer, or an authorized agent of the corporation; a member or an authorized agent of the partnership; or another individual serving as a representative of the debtor in this case.

I have examined the information in the documents checked below and I have a reasonable belief that the information is true and correct:

- ☒ *Schedule A/B: Assets—Real and Personal Property* (Official Form 206A/B)
- ☒ *Schedule D: Creditors Who Have Claims Secured by Property* (Official Form 206D)
- ☒ *Schedule E/F: Creditors Who Have Unsecured Claims* (Official Form 206E/F)
- ☒ *Schedule G: Executory Contracts and Unexpired Leases* (Official Form 206G)
- ☒ *Schedule H: Codebtors* (Official Form 206H)
- ☒ *Summary of Assets and Liabilities for Non-Individuals* (Official Form 206Sum)
- ☐ *Amended Schedule*
- ☐ *Chapter 11 or Chapter 9 Cases: List of Creditors Who Have the 20 Largest Unsecured Claims and Are Not Insiders* (Official Form 204)
- ☐ Other document that requires a declaration _____

I declare under penalty of perjury that the foregoing is true and correct.

Executed on April 5, 2024

X /s/ John N. Howard

Signature of individual signing on behalf of debtor

John N. Howard

Printed name

President and Majority Shareholder

Position or relationship to debtor

Fill in this information to identify the case:

Debtor name Join, Inc.

United States Bankruptcy Court for the: DISTRICT OF VERMONT

Case number (if known) _____

☐ Check if this is an amended filing

Official Form 206Sum
Summary of Assets and Liabilities for Non-Individuals

12/15

Part 1: Summary of Assets

1. **Schedule A/B: Assets-Real and Personal Property** (Official Form 206A/B)

1a. **Real property:**

Copy line 88 from *Schedule A/B*..... \$ **0.00**

1b. **Total personal property:**

Copy line 91A from *Schedule A/B*..... \$ **548,292.32**

1c. **Total of all property:**

Copy line 92 from *Schedule A/B*..... \$ **548,292.32**

Part 2: Summary of Liabilities

2. **Schedule D: Creditors Who Have Claims Secured by Property** (Official Form 206D)

Copy the total dollar amount listed in Column A, *Amount of claim*, from line 3 of *Schedule D*..... \$ **515,869.60**

3. **Schedule E/F: Creditors Who Have Unsecured Claims** (Official Form 206E/F)

3a. **Total claim amounts of priority unsecured claims:**

Copy the total claims from Part 1 from line 5a of *Schedule E/F*..... \$ **0.00**

3b. **Total amount of claims of nonpriority amount of unsecured claims:**

Copy the total of the amount of claims from Part 2 from line 5b of *Schedule E/F*..... +\$ **211,397.10**

4. **Total liabilities**
Lines 2 + 3a + 3b

\$ **727,266.70**

Fill in this information to identify the case:

Debtor name Join, Inc.

United States Bankruptcy Court for the: DISTRICT OF VERMONT

Case number (if known) _____

☐ Check if this is an amended filing

Official Form 206A/B Schedule A/B: Assets - Real and Personal Property

12/15

Disclose all property, real and personal, which the debtor owns or in which the debtor has any other legal, equitable, or future interest. Include all property in which the debtor holds rights and powers exercisable for the debtor's own benefit. Also include assets and properties which have no book value, such as fully depreciated assets or assets that were not capitalized. In Schedule A/B, list any executory contracts or unexpired leases. Also list them on *Schedule G: Executory Contracts and Unexpired Leases* (Official Form 206G).

Be as complete and accurate as possible. If more space is needed, attach a separate sheet to this form. At the top of any pages added, write the debtor's name and case number (if known). Also identify the form and line number to which the additional information applies. If an additional sheet is attached, include the amounts from the attachment in the total for the pertinent part.

For Part 1 through Part 11, list each asset under the appropriate category or attach separate supporting schedules, such as a fixed asset schedule or depreciation schedule, that gives the details for each asset in a particular category. List each asset only once. In valuing the debtor's interest, do not deduct the value of secured claims. See the instructions to understand the terms used in this form.

Part 1: Cash and cash equivalents

1. Does the debtor have any cash or cash equivalents?

- ☐ No. Go to Part 2.
- ☒ Yes Fill in the information below.

All cash or cash equivalents owned or controlled by the debtor

Current value of debtor's interest

3. Checking, savings, money market, or financial brokerage accounts (Identify all)

Name of institution (bank or brokerage firm)	Type of account	Last 4 digits of account number	
3.1. <u>Community Bank, N.A.</u>	<u>Money Market Savings</u>	<u>9901</u>	<u>\$4,181.21</u>
3.2. <u>Community Bank, N.A.</u>	<u>Money Market Savings</u>	<u>6938</u>	<u>\$7,493.03</u>
3.3. <u>Community Bank, N.A.</u>	<u>Money Market Savings</u>	<u>7830</u>	<u>\$5,006.63</u>

4. Other cash equivalents (Identify all)

5. Total of Part 1.

Add lines 2 through 4 (including amounts on any additional sheets). Copy the total to line 80.

\$16,680.87

Part 2: Deposits and Prepayments

6. Does the debtor have any deposits or prepayments?

- ☐ No. Go to Part 3.
- ☒ Yes Fill in the information below.

7. Deposits, including security deposits and utility deposits

Description, including name of holder of deposit

Debtor Join, Inc. Case number (If known) _____
Name

7.1. Security deposit provded to Charles Perkins and Janet Perkins in 2015 \$5,500.00

7.2. Security deposit provded to L & M Properties, LLC in 2021 \$5,100.00

8. **Prepayments, including prepayments on executory contracts, leases, insurance, taxes, and rent**
Description, including name of holder of prepayment

9. **Total of Part 2.**

Add lines 7 through 8. Copy the total to line 81.

\$10,600.00

Part 3: Accounts receivable

10. **Does the debtor have any accounts receivable?**

- ☐ No. Go to Part 4.
☒ Yes Fill in the information below.

11. **Accounts receivable**

11a. 90 days old or less: 8,798.54 - 0.00 = \$8,798.54
face amount doubtful or uncollectible accounts

12. **Total of Part 3.**

Current value on lines 11a + 11b = line 12. Copy the total to line 82.

\$8,798.54

Part 4: Investments

13. **Does the debtor own any investments?**

- ☒ No. Go to Part 5.
☐ Yes Fill in the information below.

Part 5: Inventory, excluding agriculture assets

18. **Does the debtor own any inventory (excluding agriculture assets)?**

- ☐ No. Go to Part 6.
☒ Yes Fill in the information below.

General description	Date of the last physical inventory	Net book value of debtor's interest (Where available)	Valuation method used for current value	Current value of debtor's interest
19. Raw materials				
20. Work in progress				
21. Finished goods, including goods held for resale				

Debtor Join, Inc. Case number (If known) _____
Name

The debtor's inventory consists of more than 4500 separate items and is maintained as a .xls spreadsheet and 97 page .pdf file which will be provided to the Chapter 7 Trustee, the Office of the United States Trustee and to any other creditor or party-in-interest upon request by contacting the debtor's undersigned counsel.

January 2024

\$0.00

Recent cost

\$380,620.91

22. Other inventory or supplies

23. Total of Part 5.

\$380,620.91

Add lines 19 through 22. Copy the total to line 84.

24. Is any of the property listed in Part 5 perishable?

☒ No

☐ Yes

25. Has any of the property listed in Part 5 been purchased within 20 days before the bankruptcy was filed?

☒ No

☐ Yes. Book value _____ Valuation method _____ Current Value _____

26. Has any of the property listed in Part 5 been appraised by a professional within the last year?

☒ No

☐ Yes

Part 6: Farming and fishing-related assets (other than titled motor vehicles and land)

27. Does the debtor own or lease any farming and fishing-related assets (other than titled motor vehicles and land)?

☒ No. Go to Part 7.

☐ Yes Fill in the information below.

Part 7: Office furniture, fixtures, and equipment; and collectibles

38. Does the debtor own or lease any office furniture, fixtures, equipment, or collectibles?

☒ No. Go to Part 8.

☐ Yes Fill in the information below.

Part 8: Machinery, equipment, and vehicles

46. Does the debtor own or lease any machinery, equipment, or vehicles?

☐ No. Go to Part 9.

☒ Yes Fill in the information below.

General description

Include year, make, model, and identification numbers (i.e., VIN, HIN, or N-number)

Net book value of debtor's interest
(Where available)

Valuation method used for current value

Current value of debtor's interest

47. Automobiles, vans, trucks, motorcycles, trailers, and titled farm vehicles

Debtor Join, Inc. Case number (If known) _____
Name

48. **Watercraft, trailers, motors, and related accessories** *Examples: Boats, trailers, motors, floating homes, personal watercraft, and fishing vessels*

49. **Aircraft and accessories**

50. **Other machinery, fixtures, and equipment (excluding farm machinery and equipment)**

See attached equipment list

\$0.00

Liquidation

\$131,592.00

51. **Total of Part 8.**

Add lines 47 through 50. Copy the total to line 87.

\$131,592.00

52. **Is a depreciation schedule available for any of the property listed in Part 8?**

☒ No

☐ Yes

53. **Has any of the property listed in Part 8 been appraised by a professional within the last year?**

☒ No

☐ Yes

Part 9: Real property

54. **Does the debtor own or lease any real property?**

☒ No. Go to Part 10.

☐ Yes Fill in the information below.

Part 10: Intangibles and intellectual property

59. **Does the debtor have any interests in intangibles or intellectual property?**

☐ No. Go to Part 11.

☒ Yes Fill in the information below.

General description	Net book value of debtor's interest (Where available)	Valuation method used for current value	Current value of debtor's interest
---------------------	--	---	------------------------------------

60. **Patents, copyrights, trademarks, and trade secrets**

61. **Internet domain names and websites**

Debtor owns approximately 35 domain names and the www.cheesetraders.com

\$0.00

Unknown

62. **Licenses, franchises, and royalties**

License to sell alcohol in the State of Vermont

\$0.00

\$0.00

63. **Customer lists, mailing lists, or other compilations**

64. **Other intangibles, or intellectual property**

65. **Goodwill**

66. **Total of Part 10.**

Add lines 60 through 65. Copy the total to line 89.

\$0.00

67. **Do your lists or records include personally identifiable information of customers** (as defined in 11 U.S.C. §§ 101(41A) and 107?

Debtor Join, Inc. Case number (If known) _____
Name

- ☐ No
☐ Yes

68. Is there an amortization or other similar schedule available for any of the property listed in Part 10?

- ☐ No
☐ Yes

69. Has any of the property listed in Part 10 been appraised by a professional within the last year?

- ☐ No
☐ Yes

Part 11: All other assets

70. Does the debtor own any other assets that have not yet been reported on this form?

Include all interests in executory contracts and unexpired leases not previously reported on this form.

- ☐ No. Go to Part 12.
☒ Yes Fill in the information below.

Current value of
debtor's interest

71. **Notes receivable**
Description (include name of obligor)

72. **Tax refunds and unused net operating losses (NOLs)**
Description (for example, federal, state, local)

73. **Interests in insurance policies or annuities**
Continental Western Insurance Company - Workers
Compensation and Employers Liability Insurance
Company

\$0.00

Tri-State Insurance Company of Minnesota -
Commercial Liability Umbrella Policy

\$0.00

74. **Causes of action against third parties (whether or not a lawsuit has been filed)**

75. **Other contingent and unliquidated claims or causes of action of every nature, including counterclaims of the debtor and rights to set off claims**

76. **Trusts, equitable or future interests in property**

77. **Other property of any kind not already listed** *Examples: Season tickets, country club membership*

78. **Total of Part 11.**

Add lines 71 through 77. Copy the total to line 90.

\$0.00

79. **Has any of the property listed in Part 11 been appraised by a professional within the last year?**

- ☐ No
☐ Yes

Debtor Join, Inc. Case number (If known) _____
Name

Part 12: Summary

In Part 12 copy all of the totals from the earlier parts of the form

Type of property	Current value of personal property	Current value of real property
80. Cash, cash equivalents, and financial assets. <i>Copy line 5, Part 1</i>	<u>\$16,680.87</u>	
81. Deposits and prepayments. <i>Copy line 9, Part 2.</i>	<u>\$10,600.00</u>	
82. Accounts receivable. <i>Copy line 12, Part 3.</i>	<u>\$8,798.54</u>	
83. Investments. <i>Copy line 17, Part 4.</i>	<u>\$0.00</u>	
84. Inventory. <i>Copy line 23, Part 5.</i>	<u>\$380,620.91</u>	
85. Farming and fishing-related assets. <i>Copy line 33, Part 6.</i>	<u>\$0.00</u>	
86. Office furniture, fixtures, and equipment; and collectibles. <i>Copy line 43, Part 7.</i>	<u>\$0.00</u>	
87. Machinery, equipment, and vehicles. <i>Copy line 51, Part 8.</i>	<u>\$131,592.00</u>	
88. Real property. <i>Copy line 56, Part 9.....></i>		<u>\$0.00</u>
89. Intangibles and intellectual property. <i>Copy line 66, Part 10.</i>	<u>\$0.00</u>	
90. All other assets. <i>Copy line 78, Part 11.</i>	+ <u>\$0.00</u>	
91. Total. Add lines 80 through 90 for each column	<u>\$548,292.32</u>	+ 91b. <u>\$0.00</u>
92. Total of all property on Schedule A/B. Add lines 91a+91b=92		<u>\$548,292.32</u>

FF&E List

Furniture + Fixtures + Equipment

Office	# of Units	Price Per Unit	Total
Audio Head Unit	1	\$ 150.00	\$ 150.00
Barcode Scanner	3	\$ 340.00	\$ 1,020.00
Battery Backup	4	\$ 100.00	\$ 400.00
Calculator	2	\$ 50.00	\$ 100.00
Coin Counter	1	\$ 500.00	\$ 500.00
Dymo Label Printer	3	\$ 100.00	\$ 300.00
Filing Cabinet	5	\$ 75.00	\$ 375.00
Folding Chair	8	\$ 25.00	\$ 200.00
Folding Table	1	\$ 25.00	\$ 25.00
HP Printer	2	\$ 700.00	\$ 1,400.00
iPad Handheld	1	\$ 300.00	\$ 300.00
Laminator	1	\$ 50.00	\$ 50.00
Laptop	3	\$ 700.00	\$ 2,100.00
Microwave	1	\$ 50.00	\$ 50.00
Monitor	2	\$ 200.00	\$ 400.00
Office Chair	3	\$ 100.00	\$ 300.00
Office Desk	2	\$ 150.00	\$ 300.00
Oscillating Fan	2	\$ 50.00	\$ 100.00
PC	2	\$ 700.00	\$ 1,400.00
Phone System	2	\$ 200.00	\$ 400.00
Safe	1	\$ 500.00	\$ 500.00
Sandwich Board	1	\$ 100.00	\$ 100.00
Shelving (wall)	7	\$ 25.00	\$ 175.00
Tool Box	1	\$ 25.00	\$ 25.00
Camera System	1	\$ 3,500.00	\$ 3,500.00
Wall Desk	1	\$ 250.00	\$ 250.00
Zebra Label Printer	1	\$ 450.00	\$ 450.00
Safe	1	\$ 1,000.00	\$ 1,000.00
Camera	1	\$ 700.00	\$ 700.00
		Total	\$ 16,570.00

Cheese Department	# of Units	Price Per Unit	Total
Cheese Block Cutter	4	\$ 250.00	\$ 1,000.00
Coffee Brewer	1	\$ 100.00	\$ 100.00
Deli Case Display Fridge	1	\$ 5,700.00	\$ 5,700.00
Deli Paper Dispenser	2	\$ 55.00	\$ 110.00
Kitchen Cart	1	\$ 50.00	\$ 50.00
Knives/Scissors	14	\$ 5.00	\$ 70.00
Laptop	1	\$ 700.00	\$ 700.00
Olive Bar Table	1	\$ 130.00	\$ 130.00
Olive Bar Sneeze Guard	1	\$ 450.00	\$ 450.00
Phone System	1	\$ 200.00	\$ 200.00
Price Gun	1	\$ 10.00	\$ 10.00
Scale w/ Printer	1	\$ 2,500.00	\$ 2,500.00
Shelving (floor)	2	\$ 25.00	\$ 50.00
Shelving (wall)	2	\$ 25.00	\$ 50.00
Shopping Basket (Green)	4	\$ 10.00	\$ 40.00
Small Crock Pot	1	\$ 50.00	\$ 50.00
Tape Gun	1	\$ 10.00	\$ 10.00
Work Table	3	\$ 250.00	\$ 750.00
		Total	\$ 11,970.00

Staff Area - Downstairs	# of Units	Price Per Unit	Total
Bistro Table	4	\$ 50.00	\$ 200.00
Cart (merchandising)	2	\$ 180.00	\$ 360.00
Chair	4	\$ 25.00	\$ 100.00
Chest Freezer	1	\$ 2,500.00	\$ 2,500.00
Dining Table	1	\$ 50.00	\$ 50.00
Extra Coffee Bin	2	\$ 10.00	\$ 20.00
Extra Paper Towel Disp	3	\$ 25.00	\$ 75.00
Lamp	1	\$ 25.00	\$ 25.00
Merchandising Rack	2	\$ 50.00	\$ 100.00
Microwave	1	\$ 50.00	\$ 50.00
Mop + Bucket	1	\$ 25.00	\$ 25.00
Refrigerator/Freezer	1	\$ 250.00	\$ 250.00
Shelves (wall)	2	\$ 25.00	\$ 50.00
Shelving (floor)	17	\$ 75.00	\$ 1,275.00
Steel Table	1	\$ 100.00	\$ 100.00
Toaster Oven	1	\$ 25.00	\$ 25.00
Triple Sink Unit	1	\$ 500.00	\$ 500.00
Fire panel	1	\$ 500.00	\$ 500.00
Security panel	1	\$ 500.00	\$ 500.00
		Total	\$ 6,705.00

Store - Upstairs	# of Units	Price Per Unit	Total
Barrel	1	\$ 50.00	\$ 50.00
30' Cheese Case	1	\$ 6,500.00	\$ 6,500.00
Coffee Bins	9	\$ 10.00	\$ 90.00
Coffee Grinders	2	\$ 250.00	\$ 500.00
Mini Table for Fusti	4	\$ 70.00	\$ 280.00
Red Bench (front porch)	1	\$ 400.00	\$ 400.00
Retail Fridge (double door)	1	\$ 2,500.00	\$ 2,500.00
Retail Fridge (single door)	1	\$ 1,000.00	\$ 1,000.00
Sandwich Board (faves)	1	\$ 75.00	\$ 75.00
Register Scale	1	\$ 110.00	\$ 110.00
Shelving (floor)	78	\$ 90.00	\$ 7,020.00
Shelving (wall)	18	\$ 90.00	\$ 1,620.00
Shopping Basket (black)	18	\$ 10.00	\$ 180.00
Shopping Basket rolling)	7	\$ 35.00	\$ 245.00
Shopping Cart	15	\$ 175.00	\$ 2,625.00
Steel Fusti	8	\$ 125.00	\$ 1,000.00
Steel Table	5	\$ 400.00	\$ 2,000.00
Register Counter	2	\$ 400.00	\$ 800.00
		Total	\$ 26,995.00

1212	# of Units
Bow Bin	5
Brown Paper Dispenser	6
Camera Misc Equipment	10
Cart (merchandising)	3
Chest Freezer	1
Desk	2
Double Door Fridge	1
Extra Shelf	7
Extra Steel Table Leg	6
Extra Steel Table Undershef	1
File Cabinet	2
Folding Chair	1
Hand Truck	1
Heat Gun	10
Milk Crate	45
Mop + Bucket	2
Peanut Dispenser	2
Phone System	2
Shelving (Floor)	23
Sticker Dispenser	2
Tape Dispenser (paper)	2
Tape Gun	6
Utility Sink	1
Work Tables	6
Zebra Label Printer	1

Updated 3/29/24

Grand Total \$ 131,592.00

[illegible]

Walk-In Cooler	# of Units	Price Per Unit	Total
Milk Crate	19	\$ 6.00	\$ 114.00
Shelving (floor)	13	\$ 90.00	\$ 1,170.00
Steel Table	1	\$ 150.00	\$ 150.00
Walk-in Cooler	1	\$ 5,000.00	\$ 5,000.00
Wooden Table	2	\$ 150.00	\$ 300.00
		Total	\$ 6,734.00

Carpet Room	# of Units	Price Per Unit	Total
Shelving (Floor)	10	\$ 90.00	\$ 900.00
		Total	\$ 900.00

Beer Backstock Room	# of Units	Price Per Unit	Total
Extra Cash Drawer	1	\$ 75.00	\$ 75.00
Shelving (floor)	7	\$ 90.00	\$ 630.00
Tasting Sandwich Board	1	\$ 75.00	\$ 75.00
Wooden Table	1	\$ 250.00	\$ 250.00
		Total	\$ 1,030.00

Garage - Downstairs	# of Units	Price Per Unit	Total
Air Conditioner	1	\$ 125.00	\$ 125.00
Shelving (floor)	15	\$ 90.00	\$ 1,350.00
Step Ladder	1	\$ 125.00	\$ 125.00
		Total	\$ 1,600.00

POS System	# of Units	Price Per Unit	Total
iPad	6	\$ 329.00	\$ 1,974.00
Stand	6	\$ 75.00	\$ 450.00
Barcode Scanner	6	\$ 340.00	\$ 2,040.00
Cash Drawer	7	\$ 75.00	\$ 525.00
Card Swipe	6	\$ 50.00	\$ 300.00
Receipt Printer	6	\$ 75.00	\$ 450.00
Wireless Access Point	5	\$ 125.00	\$ 625.00
		Total	\$ 6,364.00

Fill in this information to identify the case:

Debtor name Join, Inc.
United States Bankruptcy Court for the: DISTRICT OF VERMONT
Case number (if known) _____

☐ Check if this is an amended filing

Official Form 206D

Schedule D: Creditors Who Have Claims Secured by Property

12/15

Be as complete and accurate as possible.

1. Do any creditors have claims secured by debtor's property?

- ☐ No. Check this box and submit page 1 of this form to the court with debtor's other schedules. Debtor has nothing else to report on this form.
☒ Yes. Fill in all of the information below.

Part 1: List Creditors Who Have Secured Claims

2. List in alphabetical order all creditors who have secured claims. If a creditor has more than one secured claim, list the creditor separately for each claim.

		Column A Amount of claim Do not deduct the value of collateral.	Column B Value of collateral that supports this claim	
2.1	U.S. Small Business Administration <small>Creditor's Name</small> 409 3rd Street, SW Washington, DC 20416 <small>Creditor's mailing address</small> <small>Creditor's email address, if known</small> Date debt was incurred 05/13/2020 - modified on 08/04/2021 Last 4 digits of account number 7904 Do multiple creditors have an interest in the same property? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Specify each creditor, including this creditor and its relative priority.	Describe debtor's property that is subject to a lien All business assets Describe the lien UCC - July 2, 2023 Is the creditor an insider or related party? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes Is anyone else liable on this claim? <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes. Fill out <i>Schedule H: Codebtors</i> (Official Form 206H) As of the petition filing date, the claim is: Check all that apply <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$515,869.60	\$380,620.91

3. Total of the dollar amounts from Part 1, Column A, including the amounts from the Additional Page, if any. **\$515,869.60**

Part 2: List Others to Be Notified for a Debt Already Listed in Part 1

List in alphabetical order any others who must be notified for a debt already listed in Part 1. Examples of entities that may be listed are collection agencies, assignees of claims listed above, and attorneys for secured creditors.

If no others need to be notified for the debts listed in Part 1, do not fill out or submit this page. If additional pages are needed, copy this page.

Name and address	On which line in Part 1 did you enter the related creditor?	Last 4 digits of account number for this entity
U.S. Small Business Administration Office of Disaster Assistance 14925 Kingsport Road Fort Worth, TX 76155	Line 2.1	

Debtor Join, Inc. Case number (if known) _____
Name

**U.S. Small Business Administration
c/o United States Attorney
11 Elmwood Avenue, 3rd Floor
P.O. Box 570
Burlington, VT 05402**

Line 2.1

Fill in this information to identify the case:

Debtor name **Join, Inc.**

United States Bankruptcy Court for the: **DISTRICT OF VERMONT**

Case number (if known) _____

☐ Check if this is an amended filing

Official Form 206E/F

Schedule E/F: Creditors Who Have Unsecured Claims

12/15

Be as complete and accurate as possible. Use Part 1 for creditors with PRIORITY unsecured claims and Part 2 for creditors with NONPRIORITY unsecured claims. List the other party to any executory contracts or unexpired leases that could result in a claim. Also list executory contracts on *Schedule A/B: Assets - Real and Personal Property* (Official Form 206A/B) and on *Schedule G: Executory Contracts and Unexpired Leases* (Official Form 206G). Number the entries in Parts 1 and 2 in the boxes on the left. If more space is needed for Part 1 or Part 2, fill out and attach the Additional Page of that Part included in this form.

Part 1: List All Creditors with PRIORITY Unsecured Claims

1. Do any creditors have priority unsecured claims? (See 11 U.S.C. § 507).

☐ No. Go to Part 2.

☒ Yes. Go to line 2.

2. List in alphabetical order all creditors who have unsecured claims that are entitled to priority in whole or in part. If the debtor has more than 3 creditors with priority unsecured claims, fill out and attach the Additional Page of Part 1.

		Total claim	Priority amount
2.1	<p>Priority creditor's name and mailing address</p> <p>Abigail E. Ferguson 39 Strong Street Burlington, VT 05401</p> <p>Date or dates debt was incurred _____</p> <p>Last 4 digits of account number _____</p> <p>Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)</p>	<p>As of the petition filing date, the claim is:</p> <p><i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent</p> <p><input type="checkbox"/> Unliquidated</p> <p><input type="checkbox"/> Disputed</p> <p>Basis for the claim:</p> <p>Employee - notice only</p> <p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No</p> <p><input type="checkbox"/> Yes</p>	<p>\$0.00</p> <p>\$0.00</p>
2.2	<p>Priority creditor's name and mailing address</p> <p>Charlotte Pusztai-Renold 169 Loomis Street Burlington, VT 05401</p> <p>Date or dates debt was incurred _____</p> <p>Last 4 digits of account number _____</p> <p>Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)</p>	<p>As of the petition filing date, the claim is:</p> <p><i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent</p> <p><input type="checkbox"/> Unliquidated</p> <p><input type="checkbox"/> Disputed</p> <p>Basis for the claim:</p> <p>Employee - notice only</p> <p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No</p> <p><input type="checkbox"/> Yes</p>	<p>\$0.00</p> <p>\$0.00</p>

Debtor	Join, Inc. Name	Case number (if known)
2.3	<p>Priority creditor's name and mailing address</p> <p>Claire Generazio 9 Ritchie Avenue Milton, VT 05468</p> <hr/> <p>Date or dates debt was incurred</p> <hr/> <p>Last 4 digits of account number</p> <p>Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: Employee - notice only</p> <hr/> <p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>
		<p>\$0.00 \$0.00</p> <hr/>
2.4	<p>Priority creditor's name and mailing address</p> <p>Elizabeth K. Wright 17 Streeter Brook Road Milton, VT 05468</p> <hr/> <p>Date or dates debt was incurred</p> <hr/> <p>Last 4 digits of account number</p> <p>Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: Employee - notice only</p> <hr/> <p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>
		<p>\$0.00 \$0.00</p> <hr/>
2.5	<p>Priority creditor's name and mailing address</p> <p>Emily Hirauck 1 Fuller Place Unit 309 Essex Junction, VT 05452</p> <hr/> <p>Date or dates debt was incurred</p> <hr/> <p>Last 4 digits of account number</p> <p>Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: Employee - notice only</p> <hr/> <p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>
		<p>\$0.00 \$0.00</p> <hr/>
2.6	<p>Priority creditor's name and mailing address</p> <p>Internal Revenue Service P.O. Box 7346 Philadelphia, PA 19101-7346</p> <hr/> <p>Date or dates debt was incurred</p> <hr/> <p>Last 4 digits of account number</p> <p>Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (8)</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: Notice Only</p> <hr/> <p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>
		<p>\$0.00 \$0.00</p> <hr/>

Debtor	Join, Inc. <small>Name</small>	Case number (if known)
2.7	<p>Priority creditor's name and mailing address</p> <p>Jacqueline A. Lambert 1758 Reynolds Road Saint Albans, VT 05478</p> <hr/> <p>Date or dates debt was incurred</p> <hr/> <p>Last 4 digits of account number</p> <p>Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)</p>	<p>As of the petition filing date, the claim is:</p> <p><i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent</p> <p><input type="checkbox"/> Unliquidated</p> <p><input type="checkbox"/> Disputed</p> <hr/> <p>Basis for the claim:</p> <p>Employee - notice only</p> <hr/> <p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No</p> <p><input type="checkbox"/> Yes</p>
		<p>\$0.00 \$0.00</p> <hr/>
2.8	<p>Priority creditor's name and mailing address</p> <p>John N. Howard 9 Green Dolphin Drive South Burlington, VT 05403</p> <hr/> <p>Date or dates debt was incurred</p> <hr/> <p>Last 4 digits of account number</p> <p>Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)</p>	<p>As of the petition filing date, the claim is:</p> <p><i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent</p> <p><input type="checkbox"/> Unliquidated</p> <p><input type="checkbox"/> Disputed</p> <hr/> <p>Basis for the claim:</p> <p>Employee - notice only</p> <hr/> <p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No</p> <p><input type="checkbox"/> Yes</p>
		<p>\$0.00 \$0.00</p> <hr/>
2.9	<p>Priority creditor's name and mailing address</p> <p>John Wright 69 Howard Street Unit 1 Burlington, VT 05401</p> <hr/> <p>Date or dates debt was incurred</p> <hr/> <p>Last 4 digits of account number</p> <p>Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)</p>	<p>As of the petition filing date, the claim is:</p> <p><i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent</p> <p><input type="checkbox"/> Unliquidated</p> <p><input type="checkbox"/> Disputed</p> <hr/> <p>Basis for the claim:</p> <p>Employee - notice only</p> <hr/> <p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No</p> <p><input type="checkbox"/> Yes</p>
		<p>\$0.00 \$0.00</p> <hr/>
2.10	<p>Priority creditor's name and mailing address</p> <p>Lanah A. Kelly 13704 Sunny Lane Grand Haven, MI 49417</p> <hr/> <p>Date or dates debt was incurred</p> <hr/> <p>Last 4 digits of account number</p> <p>Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)</p>	<p>As of the petition filing date, the claim is:</p> <p><i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent</p> <p><input type="checkbox"/> Unliquidated</p> <p><input type="checkbox"/> Disputed</p> <hr/> <p>Basis for the claim:</p> <p>Employee - notice only</p> <hr/> <p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No</p> <p><input type="checkbox"/> Yes</p>
		<p>\$0.00 \$0.00</p> <hr/>

Debtor	Join, Inc. <small>Name</small>		Case number (if known)
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2.11	Priority creditor's name and mailing address Maxim Roznerita 20 Shawmut Park Newton Upper Falls, MA 02464	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$0.00	\$0.00
	Date or dates debt was incurred	Basis for the claim: Employee - notice only		
	Last 4 digits of account number	Is the claim subject to offset?		
	Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

2.12	Priority creditor's name and mailing address Meredith Lambert 1758 Reynolds Road Saint Albans, VT 05478	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$0.00	\$0.00
	Date or dates debt was incurred	Basis for the claim: Employee - notice only		
	Last 4 digits of account number	Is the claim subject to offset?		
	Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

2.13	Priority creditor's name and mailing address Michael W. Deasy 1189 East Street Mansfield, MA 02048	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$0.00	\$0.00
	Date or dates debt was incurred	Basis for the claim: Employee - notice only		
	Last 4 digits of account number	Is the claim subject to offset?		
	Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

2.14	Priority creditor's name and mailing address Morgan Kennedy 2 Autumn St. West Worcester, MA 01603	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$0.00	\$0.00
	Date or dates debt was incurred	Basis for the claim: Employee - notice only		
	Last 4 digits of account number	Is the claim subject to offset?		
	Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

Debtor	Join, Inc. <small>Name</small>	Case number (if known)
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2.15	Priority creditor's name and mailing address Nick Savasta 9 Green Dolphin Drive South Burlington, VT 05403	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$0.00	\$0.00
Date or dates debt was incurred		Basis for the claim: Employee - notice only		
Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

2.16	Priority creditor's name and mailing address Nora R. Bodner 7 Handy Court Burlington, VT 05405	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$0.00	\$0.00
Date or dates debt was incurred		Basis for the claim: Employee - notice only		
Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

2.17	Priority creditor's name and mailing address Patrick B. Clear 21 Orchard Road South Burlington, VT 05403	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$0.00	\$0.00
Date or dates debt was incurred		Basis for the claim: Employee - notice only		
Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

2.18	Priority creditor's name and mailing address Reid S. Corliss 9 Roland Street Medford, MA 02155	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$0.00	\$0.00
Date or dates debt was incurred		Basis for the claim: Employee - notice only		
Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

Debtor	Join, Inc. Name	Case number (if known)
2.19	<p>Priority creditor's name and mailing address</p> <p>Renee E. Willard-Hunt 15 Cascade Way Apartment 505 Winooski, VT 05404</p> <hr/> <p>Date or dates debt was incurred</p> <hr/> <p>Last 4 digits of account number</p> <p>Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <hr/> <p>Basis for the claim: Employee - notice only</p> <hr/> <p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>
		<p>\$0.00 \$0.00</p> <hr/>
2.20	<p>Priority creditor's name and mailing address</p> <p>Rose E. Friedlander 148 Sherwood Forest Road Williston, VT 05495</p> <hr/> <p>Date or dates debt was incurred</p> <hr/> <p>Last 4 digits of account number</p> <p>Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <hr/> <p>Basis for the claim: Employee - notice only</p> <hr/> <p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>
		<p>\$0.00 \$0.00</p> <hr/>
2.21	<p>Priority creditor's name and mailing address</p> <p>Sonia Charmoy 75 Northwood Drive Easton, CT 06612</p> <hr/> <p>Date or dates debt was incurred</p> <hr/> <p>Last 4 digits of account number</p> <p>Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <hr/> <p>Basis for the claim: Employee - notice only</p> <hr/> <p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>
		<p>\$0.00 \$0.00</p> <hr/>
2.22	<p>Priority creditor's name and mailing address</p> <p>Trevor M. Barr 39 Shepard Street Winooski, VT 05404</p> <hr/> <p>Date or dates debt was incurred</p> <hr/> <p>Last 4 digits of account number</p> <p>Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <hr/> <p>Basis for the claim: Employee - notice only</p> <hr/> <p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>
		<p>\$0.00 \$0.00</p> <hr/>

Debtor	Join, Inc. Name	Case number (if known)
2.23	<p>Priority creditor's name and mailing address</p> <p>Vermont Department of Labor 5 Green Mountain Drive P.O. Box 488 Montpelier, VT 05601-0488</p> <hr/> <p>Date or dates debt was incurred</p> <hr/> <p>Last 4 digits of account number</p> <p>Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <hr/> <p>Basis for the claim: Notice Only</p> <hr/> <p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>
		<div style="border-top: 1px solid black; width: 100px; margin: 0 auto;">\$0.00</div> <div style="border-top: 1px solid black; width: 100px; margin: 0 auto;">\$0.00</div>
2.24	<p>Priority creditor's name and mailing address</p> <p>Vermont Department of Liquor and Lottery 1311 US Route 302 Suite 100 Barre, VT 05641</p> <hr/> <p>Date or dates debt was incurred</p> <hr/> <p>Last 4 digits of account number</p> <p>Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (8)</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <hr/> <p>Basis for the claim: Notice Only</p> <hr/> <p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>
		<div style="border-top: 1px solid black; width: 100px; margin: 0 auto;">\$0.00</div> <div style="border-top: 1px solid black; width: 100px; margin: 0 auto;">\$0.00</div>
2.25	<p>Priority creditor's name and mailing address</p> <p>Vermont Department of Taxes Bankruptcy Unit, 3rd Floor 109 State Street P.O. Box 429 Montpelier, VT 05601-0429</p> <hr/> <p>Date or dates debt was incurred</p> <hr/> <p>Last 4 digits of account number</p> <p>Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (8)</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <hr/> <p>Basis for the claim: Notice Only</p> <hr/> <p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>
		<div style="border-top: 1px solid black; width: 100px; margin: 0 auto;">\$0.00</div> <div style="border-top: 1px solid black; width: 100px; margin: 0 auto;">\$0.00</div>
2.26	<p>Priority creditor's name and mailing address</p> <p>William P. Fogarty 14 Mayfair Street South Burlington, VT 05403</p> <hr/> <p>Date or dates debt was incurred</p> <hr/> <p>Last 4 digits of account number</p> <p>Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <hr/> <p>Basis for the claim: Employee - notice only</p> <hr/> <p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>
		<div style="border-top: 1px solid black; width: 100px; margin: 0 auto;">\$0.00</div> <div style="border-top: 1px solid black; width: 100px; margin: 0 auto;">\$0.00</div>

Debtor **Join, Inc.** Case number (if known) _____
Name

2.27	Priority creditor's name and mailing address Wynne R. Adamson 5 Scotsdale Road South Burlington, VT 05403	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$0.00	\$0.00
Date or dates debt was incurred _____		Basis for the claim: Employee - notice only		
Last 4 digits of account number _____ Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

2.28	Priority creditor's name and mailing address Zoey A. Womick 623 Spring Meadows Drive Ballwin, MO 63011	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$0.00	\$0.00
Date or dates debt was incurred _____		Basis for the claim: Employee - notice only		
Last 4 digits of account number _____ Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

Part 2: List All Creditors with NONPRIORITY Unsecured Claims

3. List in alphabetical order all of the creditors with nonpriority unsecured claims. If the debtor has more than 6 creditors with nonpriority unsecured claims, fill out and attach the Additional Page of Part 2.

3.1	Nonpriority creditor's name and mailing address Acadia Insurance Company One Acadia Commons P.O. Box 9010 Westbrook, ME 04098-5010	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	Amount of claim	\$0.00
Date(s) debt was incurred _____ Last 4 digits of account number _____		Basis for the claim: Notice Only - Debtor's Insurance Agency Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

3.2	Nonpriority creditor's name and mailing address American Express P.O. Box 981537 El Paso, TX 79998	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$158,183.95	
Date(s) debt was incurred <u>Various</u> Last 4 digits of account number <u>4008</u>		Basis for the claim: Business credit card Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

3.3	Nonpriority creditor's name and mailing address Charles N. Perkins and Janet B. Perkins 80 South Cove Road Burlington, VT 05401	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$16,469.66	
Date(s) debt was incurred <u>April 2024</u> Last 4 digits of account number _____		Basis for the claim: Rent and property taxes; expected to be additional fees due to rejected commercial lease Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

Debtor **Join, Inc.**
Name

Case number (if known)

3.4	Nonpriority creditor's name and mailing address L & M Properties, LLC 105 Appletree Point Road Burlington, VT 05408 Date(s) debt was incurred <u>April 2024</u> Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>April rent, taxes, snowplowing and CAM charges; expected to be additional fees due to rejected commercial lease</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$2,474.43
3.5	Nonpriority creditor's name and mailing address Myers Container Services Corp. P.O. Box 38 Winooski, VT 05404 Date(s) debt was incurred <u>March 2024</u> Last 4 digits of account number <u>1335</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Trash pickup</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$614.06
3.6	Nonpriority creditor's name and mailing address United Natural Food, Inc. (UNFI) P.O. Box 419719 Boston, MA 02241-9719 Date(s) debt was incurred <u>2022-2023</u> Last 4 digits of account number <u>9641</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: <u>Vendor</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$31,855.00
3.7	Nonpriority creditor's name and mailing address VT Welcome Center Ad Sales Program 134 State St. Montpelier, VT 05633 Date(s) debt was incurred <u>2024</u> Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Advertising</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,800.00

Part 3: List Others to Be Notified About Unsecured Claims

4. List in alphabetical order any others who must be notified for claims listed in Parts 1 and 2. Examples of entities that may be listed are collection agencies, assignees of claims listed above, and attorneys for unsecured creditors.

If no others need to be notified for the debts listed in Parts 1 and 2, do not fill out or submit this page. If additional pages are needed, copy the next page.

	Name and mailing address	On which line in Part 1 or Part 2 is the related creditor (if any) listed?	Last 4 digits of account number, if any
4.1	American Express P.O. Box 981535 El Paso, TX 79998-1535	Line <u>3.2</u> <input type="checkbox"/> Not listed. Explain _____	—
4.2	Internal Revenue Service c/o United States Attorney 11 Elmwood Avenue, 3rd Floor P.O. Box 570 Burlington, VT 05402	Line <u>2.6</u> <input type="checkbox"/> Not listed. Explain _____	—
4.3	Kinney Pike Insurance 1011 North Main Street White River Junction, VT 05001	Line <u>3.1</u> <input type="checkbox"/> Not listed. Explain _____	—
4.4	Vermont Department of Labor c/o VT Attorney General 109 State Street Montpelier, VT 05609-1001	Line <u>2.23</u> <input type="checkbox"/> Not listed. Explain _____	—

Debtor Join, Inc. <small>Name</small> <div style="background-color: #f0f0f0; padding: 5px; margin-top: 5px;">Name and mailing address</div>	Case number (if known) _____ <div style="display: flex; justify-content: space-between; margin-top: 10px;"> <div style="width: 60%; background-color: #f0f0f0; padding: 5px;">On which line in Part 1 or Part 2 is the related creditor (if any) listed?</div> <div style="width: 35%; background-color: #f0f0f0; padding: 5px;">Last 4 digits of account number, if any</div> </div>
4.5 Vermont Department of Liquor and Lottery c/o VT Attorney General 109 State Street Montpelier, VT 05609-1001	Line <u>2.24</u> <input type="checkbox"/> Not listed. Explain _____

Part 4: Total Amounts of the Priority and Nonpriority Unsecured Claims

5. Add the amounts of priority and nonpriority unsecured claims.

5a. Total claims from Part 1

5b. Total claims from Part 2

5c. Total of Parts 1 and 2

Lines 5a + 5b = 5c.

Total of claim amounts	
5a.	\$ <u>0.00</u>
5b. +	\$ <u>211,397.10</u>
5c.	\$ <u>211,397.10</u>

Fill in this information to identify the case:

Debtor name Join, Inc.

United States Bankruptcy Court for the: DISTRICT OF VERMONT

Case number (if known) _____

☐ Check if this is an amended filing

Official Form 206G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If more space is needed, copy and attach the additional page, number the entries consecutively.

1. Does the debtor have any executory contracts or unexpired leases?

☐ No. Check this box and file this form with the debtor's other schedules. There is nothing else to report on this form.

☒ Yes. Fill in all of the information below even if the contacts of leases are listed on *Schedule A/B: Assets - Real and Personal* (Official Form 206A/B). *Property*

2. List all contracts and unexpired leases

State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease

2.1. State what the contract or lease is for and the nature of the debtor's interest

Commerical real estate lease for the complete commercial building located at 1186 Williston Road, South Burlington, 05403 entered into November 1, 2021 for ten years Lease ends 10/31/2031

State the term remaining

List the contract number of any government contract

N/A

**Charles N. Perkins and Janet B. Perkins
80 South Cove Road
Burlington, VT 05401**

2.2. State what the contract or lease is for and the nature of the debtor's interest

Commercial real estate lease for 1650+/- square feet of retail space located at 1212 Williston Road, South Burlington, VT 05403 entered into July 1, 2021 for a five year term

State the term remaining

List the contract number of any government contract

Lease terminates June 30, 2026

N/A

**L & M Properties, LLC
105 Appletree Point Road
Burlington, VT 05408**

Fill in this information to identify the case:

Debtor name Join, Inc.
United States Bankruptcy Court for the: DISTRICT OF VERMONT
Case number (if known) _____

☐ Check if this is an amended filing

Official Form 206H Schedule H: Your Codebtors

12/15

Be as complete and accurate as possible. If more space is needed, copy the Additional Page, numbering the entries consecutively. Attach the Additional Page to this page.

1. Do you have any codebtors?

- ☐ No. Check this box and submit this form to the court with the debtor's other schedules. Nothing else needs to be reported on this form.
☒ Yes

2. In Column 1, list as codebtors all of the people or entities who are also liable for any debts listed by the debtor in the schedules of creditors, Schedules D-G. Include all guarantors and co-obligors. In Column 2, identify the creditor to whom the debt is owed and each schedule on which the creditor is listed. If the codebtor is liable on a debt to more than one creditor, list each creditor separately in Column 2.

Column 1: Codebtor

Column 2: Creditor

Name

Mailing Address

Name

Check all schedules that apply:

2.1	John N. Howard	9 Green Dolphin Drive South Burlington, VT 05403	U.S. Small Business Administration	<input checked="" type="checkbox"/> D <u>2.1</u> <input type="checkbox"/> E/F _____ <input type="checkbox"/> G _____
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2.2	Nick Savasta	9 Green Dolphin Drive South Burlington, VT 05403	U.S. Small Business Administration	<input checked="" type="checkbox"/> D <u>2.1</u> <input type="checkbox"/> E/F _____ <input type="checkbox"/> G _____
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2.3	John N. Howard	9 Green Dolphin Drive South Burlington, VT 05403	L & M Properties, LLC	<input type="checkbox"/> D _____ <input type="checkbox"/> E/F _____ <input checked="" type="checkbox"/> G <u>2.2</u>
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2.4	Nick Savasta	9 Green Dolphin Drive South Burlington, VT 05403	L & M Properties, LLC	<input type="checkbox"/> D _____ <input type="checkbox"/> E/F _____ <input checked="" type="checkbox"/> G <u>2.2</u>
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Fill in this information to identify the case:

Debtor name Join, Inc.
United States Bankruptcy Court for the: DISTRICT OF VERMONT
Case number (if known) _____

☐ Check if this is an amended filing

Official Form 207

Statement of Financial Affairs for Non-Individuals Filing for Bankruptcy

04/22

The debtor must answer every question. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write the debtor's name and case number (if known).

Part 1: Income

1. Gross revenue from business

☐ None.

Identify the beginning and ending dates of the debtor's fiscal year, which may be a calendar year

From the beginning of the fiscal year to filing date:
From 1/01/2024 to **Filing Date**

Sources of revenue
Check all that apply

☐ Operating a business

☒ Other **Gross Business Receipts**

Gross revenue
(before deductions and exclusions)

\$484,320.07

For prior year:
From 1/01/2023 to 12/31/2023

☐ Operating a business

☒ Other **Gross Business Receipts**

\$3,150,279.00

For year before that:
From 1/01/2022 to 12/31/2022

☐ Operating a business

☒ Other **Gross Business Receipts**

\$3,275,149.00

2. Non-business revenue

Include revenue regardless of whether that revenue is taxable. *Non-business income* may include interest, dividends, money collected from lawsuits, and royalties. List each source and the gross revenue for each separately. Do not include revenue listed in line 1.

☒ None.

Description of sources of revenue

Gross revenue from each source
(before deductions and exclusions)

Part 2: List Certain Transfers Made Before Filing for Bankruptcy

3. Certain payments or transfers to creditors within 90 days before filing this case

List payments or transfers—including expense reimbursements—to any creditor, other than regular employee compensation, within 90 days before filing this case unless the aggregate value of all property transferred to that creditor is less than \$7,575. (This amount may be adjusted on 4/01/25 and every 3 years after that with respect to cases filed on or after the date of adjustment.)

☐ None.

Creditor's Name and Address

Dates

Total amount of value

Reasons for payment or transfer
Check all that apply

Debtor **Join, Inc.**

Case number (if known)

Creditor's Name and Address	Dates	Total amount of value	Reasons for payment or transfer <i>Check all that apply</i>
3.1. Arcade Snacks P.O. Box 375 Auburn, MA 01501	January 27, 2024 - April 5, 2024	\$13,776.61	<input type="checkbox"/> Secured debt <input type="checkbox"/> Unsecured loan repayments <input checked="" type="checkbox"/> Suppliers or vendors <input type="checkbox"/> Services <input type="checkbox"/> Other__
3.2. Cabot Creamery Co-Op, Inc. 193 Home Farm Way Waitsfield, VT 05673	January 18, 2024 - March 14, 2024	\$12,732.30	<input type="checkbox"/> Secured debt <input type="checkbox"/> Unsecured loan repayments <input checked="" type="checkbox"/> Suppliers or vendors <input type="checkbox"/> Services <input type="checkbox"/> Other__
3.3. Gallagher, Flynn & Co. 725 Community Drive Suite 401 South Burlington, VT 05403	March 1, 2024 - April 3, 2024	\$20,852.50	<input type="checkbox"/> Secured debt <input type="checkbox"/> Unsecured loan repayments <input type="checkbox"/> Suppliers or vendors <input checked="" type="checkbox"/> Services <input type="checkbox"/> Other__
3.4. Mimi Foods, LLC 307 W. Tremont Avenue Suite 200 Charlotte, NC 28203	February 5, 2024 - March 5, 2024	\$9,551.68	<input type="checkbox"/> Secured debt <input type="checkbox"/> Unsecured loan repayments <input checked="" type="checkbox"/> Suppliers or vendors <input type="checkbox"/> Services <input type="checkbox"/> Other__
3.5. Provisions International, Ltd. 42 North Main Street White River Junction, VT 05001	January 18, 2024 - February 16, 2024	\$13,771.05	<input type="checkbox"/> Secured debt <input type="checkbox"/> Unsecured loan repayments <input checked="" type="checkbox"/> Suppliers or vendors <input type="checkbox"/> Services <input type="checkbox"/> Other__
3.6. Seacrest Foods International, Inc. 86 Bennett Street Lynn, MA 01905	January 18, 2024 - April 5, 2024	\$9,987.93	<input type="checkbox"/> Secured debt <input type="checkbox"/> Unsecured loan repayments <input checked="" type="checkbox"/> Suppliers or vendors <input type="checkbox"/> Services <input type="checkbox"/> Other__

4. Payments or other transfers of property made within 1 year before filing this case that benefited any insider

List payments or transfers, including expense reimbursements, made within 1 year before filing this case on debts owed to an insider or guaranteed or cosigned by an insider unless the aggregate value of all property transferred to or for the benefit of the insider is less than \$7,575. (This amount may be adjusted on 4/01/25 and every 3 years after that with respect to cases filed on or after the date of adjustment.) Do not include any payments listed in line 3. *Insiders* include officers, directors, and anyone in control of a corporate debtor and their relatives; general partners of a partnership debtor and their relatives; affiliates of the debtor and insiders of such affiliates; and any managing agent of the debtor. 11 U.S.C. § 101(31).

☐ None.

Insider's name and address Relationship to debtor	Dates	Total amount of value	Reasons for payment or transfer
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Debtor **Join, Inc.**

Case number (if known)

Insider's name and address Relationship to debtor	Dates	Total amount of value	Reasons for payment or transfer
4.1. Nick Savasta 9 Green Dolphin Drive South Burlington, VT 05403 Minority Shareholder	June 13, 2023 (\$3,000), July 23, 2023 (\$1,000), August 18, 2023 (\$2,000), September 1, 2023 (\$1,000), October 14, 2023 (\$1,500), November 15, 2023 (\$1,500)	\$10,000.00	Expense reimbursements
4.2. Nick Savasta 9 Green Dolphin Drive South Burlington, VT 05403 Minority Shareholder	\$1,650 per week (gross)	\$85,800.00	Salary/payroll
4.3. John Howard 9 Green Dolphin Drive South Burlington, VT 05403 Majority Shareholder	\$1,650 per week (gross)	\$85,800.00	Salary/payroll

5. Repossessions, foreclosures, and returns

List all property of the debtor that was obtained by a creditor within 1 year before filing this case, including property repossessed by a creditor, sold at a foreclosure sale, transferred by a deed in lieu of foreclosure, or returned to the seller. Do not include property listed in line 6.

☐ None

Creditor's name and address	Describe of the Property	Date	Value of property
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6. Setoffs

List any creditor, including a bank or financial institution, that within 90 days before filing this case set off or otherwise took anything from an account of the debtor without permission or refused to make a payment at the debtor's direction from an account of the debtor because the debtor owed a debt.

☐ None

Creditor's name and address	Description of the action creditor took	Date action was taken	Amount
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Part 3: Legal Actions or Assignments**7. Legal actions, administrative proceedings, court actions, executions, attachments, or governmental audits**

List the legal actions, proceedings, investigations, arbitrations, mediations, and audits by federal or state agencies in which the debtor was involved in any capacity—within 1 year before filing this case.

☐ None.

Case title Case number	Nature of case	Court or agency's name and address	Status of case
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8. Assignments and receivership

List any property in the hands of an assignee for the benefit of creditors during the 120 days before filing this case and any property in the hands of a receiver, custodian, or other court-appointed officer within 1 year before filing this case.

Debtor Join, Inc.

Case number (if known) _____

☒ None**Part 4: Certain Gifts and Charitable Contributions**

9. List all gifts or charitable contributions the debtor gave to a recipient within 2 years before filing this case unless the aggregate value of the gifts to that recipient is less than \$1,000

☒ None

Recipient's name and address	Description of the gifts or contributions	Dates given	Value
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Part 5: Certain Losses

10. All losses from fire, theft, or other casualty within 1 year before filing this case.

☒ None

Description of the property lost and how the loss occurred	Amount of payments received for the loss <small>If you have received payments to cover the loss, for example, from insurance, government compensation, or tort liability, list the total received. List unpaid claims on Official Form 106A/B (Schedule A/B: Assets – Real and Personal Property).</small>	Dates of loss	Value of property lost
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Part 6: Certain Payments or Transfers**11. Payments related to bankruptcy**

List any payments of money or other transfers of property made by the debtor or person acting on behalf of the debtor within 1 year before the filing of this case to another person or entity, including attorneys, that the debtor consulted about debt consolidation or restructuring, seeking bankruptcy relief, or filing a bankruptcy case.

☐ None.

	Who was paid or who received the transfer? Address	If not money, describe any property transferred	Dates	Total amount or value
11.1.	Fisher Law Offices, PLLC 45 Lyme Road, Suite 205 Hanover, NH 03755	Flat Fee Consultation	March 4, 2024	\$300.00
	Email or website address fisher@mbfisherlaw.com			
	Who made the payment, if not debtor?			
11.2.	Fisher Law Offices, PLLC 45 Lyme Road, Suite 205 Hanover, NH 03755	Attorney Fees - Deposit	March 10, 2024	\$500.00
	Email or website address fisher@mbfisherlaw.com			
	Who made the payment, if not debtor? Nick Savasta			

Debtor **Join, Inc.**

Case number (if known)

	Who was paid or who received the transfer? Address	If not money, describe any property transferred	Dates	Total amount or value
11.3.	Fisher Law Offices, PLLC 45 Lyme Road, Suite 205 Hanover, NH 03755	Attorney Fees - Balance (\$6,000) and Court Filing Fee (\$338)	April 5, 2024	\$6,338.00

Email or website address
fisher@mbfisherlaw.com

Who made the payment, if not debtor?

12. Self-settled trusts of which the debtor is a beneficiary

List any payments or transfers of property made by the debtor or a person acting on behalf of the debtor within 10 years before the filing of this case to a self-settled trust or similar device.

Do not include transfers already listed on this statement.

☒ None.

Name of trust or device	Describe any property transferred	Dates transfers were made	Total amount or value
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13. Transfers not already listed on this statement

List any transfers of money or other property by sale, trade, or any other means made by the debtor or a person acting on behalf of the debtor within 2 years before the filing of this case to another person, other than property transferred in the ordinary course of business or financial affairs. Include both outright transfers and transfers made as security. Do not include gifts or transfers previously listed on this statement.

☐ None.

	Who received transfer? Address	Description of property transferred or payments received or debts paid in exchange	Date transfer was made	Total amount or value
13.1	Nick Savasta 9 Green Dolphin Drive South Burlington, VT 05403	2017 Subaru Outback valued at \$14308; vehicle was jointly titled to the debtor and Nick Savasta and was sold for its fair market value	March 29, 2024	\$14,308.00

Relationship to debtor
Minority Shareholder

13.2	John Howard 9 Green Dolphin Drive South Burlington, VT 05403	2023 Subaru WRX valued at \$34075; vehicle was jointly titled to the debtor and John Howard and was sold for its fair market value	March 27, 2024	\$34,798.04
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Relationship to debtor
Majority Shareholder

Part 7: Previous Locations**14. Previous addresses**

List all previous addresses used by the debtor within 3 years before filing this case and the dates the addresses were used.

☒ Does not apply

Address	Dates of occupancy From-To
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Part 8: Health Care Bankruptcies**15. Health Care bankruptcies**

Is the debtor primarily engaged in offering services and facilities for:

Debtor **Join, Inc.**

Case number (if known)

- diagnosing or treating injury, deformity, or disease, or
- providing any surgical, psychiatric, drug treatment, or obstetric care?

- ☒ No. Go to Part 9.
☐ Yes. Fill in the information below.

Facility name and address

Nature of the business operation, including type of services the debtor provides

If debtor provides meals and housing, number of patients in debtor's care

Part 9: Personally Identifiable Information**16. Does the debtor collect and retain personally identifiable information of customers?**

- ☒ No.
☐ Yes. State the nature of the information collected and retained.

17. Within 6 years before filing this case, have any employees of the debtor been participants in any ERISA, 401(k), 403(b), or other pension or profit-sharing plan made available by the debtor as an employee benefit?

- ☒ No. Go to Part 10.
☐ Yes. Does the debtor serve as plan administrator?

Part 10: Certain Financial Accounts, Safe Deposit Boxes, and Storage Units**18. Closed financial accounts**

Within 1 year before filing this case, were any financial accounts or instruments held in the debtor's name, or for the debtor's benefit, closed, sold, moved, or transferred?

Include checking, savings, money market, or other financial accounts; certificates of deposit; and shares in banks, credit unions, brokerage houses, cooperatives, associations, and other financial institutions.

☐ None

	Financial Institution name and Address	Last 4 digits of account number	Type of account or instrument	Date account was closed, sold, moved, or transferred	Last balance before closing or transfer
18.1.	Opportunities Credit Union 92 North Avenue Suite 100 Burlington, VT 05401	XXXX-24	<input type="checkbox"/> Checking <input checked="" type="checkbox"/> Savings <input type="checkbox"/> Money Market <input type="checkbox"/> Brokerage <input type="checkbox"/> Other__	February 20, 2024	\$5,524.89
18.2.	Opportunities Credit Union 92 North Avenue Suite 100 Burlington, VT 05401	XXXX-24	<input type="checkbox"/> Checking <input checked="" type="checkbox"/> Savings <input type="checkbox"/> Money Market <input type="checkbox"/> Brokerage <input type="checkbox"/> Other__	February 20, 2024	\$146,097.62

19. Safe deposit boxes

List any safe deposit box or other depository for securities, cash, or other valuables the debtor now has or did have within 1 year before filing this case.

☒ None

Depository institution name and address

Names of anyone with access to it
Address

Description of the contents

Does debtor still have it?

20. Off-premises storage

List any property kept in storage units or warehouses within 1 year before filing this case. Do not include facilities that are in a part of a building in which the debtor does business.

Debtor Join, Inc.

Case number (if known) _____

☐ None

Facility name and address	Names of anyone with access to it	Description of the contents	Does debtor still have it?
Rented Space 1212 Williston Road South Burlington, VT 05403	Nick Savasta, John Howard and L&M Properties, LLC	Inventory and equipment	<input type="checkbox"/> No <input checked="" type="checkbox"/> Yes

Part 11: Property the Debtor Holds or Controls That the Debtor Does Not Own**21. Property held for another**

List any property that the debtor holds or controls that another entity owns. Include any property borrowed from, being stored for, or held in trust. Do not list leased or rented property.

☒ None**Part 12: Details About Environment Information**

For the purpose of Part 12, the following definitions apply:

Environmental law means any statute or governmental regulation that concerns pollution, contamination, or hazardous material, regardless of the medium affected (air, land, water, or any other medium).

Site means any location, facility, or property, including disposal sites, that the debtor now owns, operates, or utilizes or that the debtor formerly owned, operated, or utilized.

Hazardous material means anything that an environmental law defines as hazardous or toxic, or describes as a pollutant, contaminant, or a similarly harmful substance.

Report all notices, releases, and proceedings known, regardless of when they occurred.

22. Has the debtor been a party in any judicial or administrative proceeding under any environmental law? Include settlements and orders.

- ☒ No.
☐ Yes. Provide details below.

Case title Case number	Court or agency name and address	Nature of the case	Status of case
---------------------------	----------------------------------	--------------------	----------------

23. Has any governmental unit otherwise notified the debtor that the debtor may be liable or potentially liable under or in violation of an environmental law?

- ☒ No.
☐ Yes. Provide details below.

Site name and address	Governmental unit name and address	Environmental law, if known	Date of notice
-----------------------	------------------------------------	-----------------------------	----------------

24. Has the debtor notified any governmental unit of any release of hazardous material?

- ☒ No.
☐ Yes. Provide details below.

Site name and address	Governmental unit name and address	Environmental law, if known	Date of notice
-----------------------	------------------------------------	-----------------------------	----------------

Part 13: Details About the Debtor's Business or Connections to Any Business**25. Other businesses in which the debtor has or has had an interest**

List any business for which the debtor was an owner, partner, member, or otherwise a person in control within 6 years before filing this case. Include this information even if already listed in the Schedules.

Debtor **Join, Inc.**

Case number (if known)

☒ None**Business name address****Describe the nature of the business****Employer Identification number**

Do not include Social Security number or ITIN.

Dates business existed**26. Books, records, and financial statements**

26a. List all accountants and bookkeepers who maintained the debtor's books and records within 2 years before filing this case.

☐ None**Name and address****Date of service
From-To**26a.1. **ADP, Inc.****Handled all of
debtor's payroll
since July 2023**26a.2. **Asure Paydata****Handled debtor's
payroll from
2015-2023**26a.3. **Gallagher, Flynn & Co.
725 Community Drive
Suite 401
Attn: Chelsea Condos
South Burlington, VT 05403****June 2023 - current**26a.4. **Stowe CPAs
53 Old Farm Road
P.O. Box 1020
Attn: Justin Wicks
Stowe, VT 05672****2018-2023**

26b. List all firms or individuals who have audited, compiled, or reviewed debtor's books of account and records or prepared a financial statement within 2 years before filing this case.

☒ None

26c. List all firms or individuals who were in possession of the debtor's books of account and records when this case is filed.

☐ None**Name and address****If any books of account and records are
unavailable, explain why**26c.1. **Gallagher, Flynn & Co.
725 Community Drive
Suite 401
Attn: Chelsea Condos
South Burlington, VT 05403**26c.2. **Stowe CPAs
53 Old Farm Road
P.O. Box 1020
Attn: Justin Wicks
Stowe, VT 05672**26c.3. **John N. Howard
9 Green Dolphin Drive
South Burlington, VT 05403**26c.4. **Nick Savasta
9 Green Dolphin Drive
South Burlington, VT 05403**

Debtor Join, Inc.

Case number (if known) _____

26d. List all financial institutions, creditors, and other parties, including mercantile and trade agencies, to whom the debtor issued a financial statement within 2 years before filing this case.

☒ None

Name and address

27. **Inventories**

Have any inventories of the debtor's property been taken within 2 years before filing this case?

☐ No

☒ Yes. Give the details about the two most recent inventories.

	Name of the person who supervised the taking of the inventory	Date of inventory	The dollar amount and basis (cost, market, or other basis) of each inventory
27.1	Corey Trask	January 17, 2024	\$436,933.75

Name and address of the person who has possession of inventory records

Assured Inventory Loss Prevention Svcs.
P.O. Box 601
Camden, NY 13316

28. List the debtor's officers, directors, managing members, general partners, members in control, controlling shareholders, or other people in control of the debtor at the time of the filing of this case.

Name	Address	Position and nature of any interest	% of interest, if any
Nick Savasta	9 Green Dolphin Drive South Burlington, VT 05403	Shareholder	49%
John N. Howard	9 Green Dolphin Drive South Burlington, VT 05403	Shareholder	51%

29. Within 1 year before the filing of this case, did the debtor have officers, directors, managing members, general partners, members in control of the debtor, or shareholders in control of the debtor who no longer hold these positions?

☒ No

☐ Yes. Identify below.

30. **Payments, distributions, or withdrawals credited or given to insiders**

Within 1 year before filing this case, did the debtor provide an insider with value in any form, including salary, other compensation, draws, bonuses, loans, credits on loans, stock redemptions, and options exercised?

☐ No

☒ Yes. Identify below.

Debtor Join, Inc.

Case number (if known) _____

	Name and address of recipient	Amount of money or description and value of property	Dates	Reason for providing the value
30.1	John N. Howard 9 Green Dolphin Drive South Burlington, VT 05403	\$1650.00 Gross/Week	Weekly	Salary/payroll
	Relationship to debtor Majority Shareholder and Employee			
30.2	Nick Savasta 9 Green Dolphin Drive South Burlington, VT 05403	\$1650.00 Gross/Week	Weekly	Salary/payroll
	Relationship to debtor Minority Shareholder			

31. Within 6 years before filing this case, has the debtor been a member of any consolidated group for tax purposes?

- ☒ No
☐ Yes. Identify below.

Name of the parent corporation

Employer Identification number of the parent corporation

32. Within 6 years before filing this case, has the debtor as an employer been responsible for contributing to a pension fund?

- ☒ No
☐ Yes. Identify below.

Name of the pension fund

Employer Identification number of the pension fund

Part 14: Signature and Declaration

WARNING -- Bankruptcy fraud is a serious crime. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$500,000 or imprisonment for up to 20 years, or both.
18 U.S.C. §§ 152, 1341, 1519, and 3571.

I have examined the information in this *Statement of Financial Affairs* and any attachments and have a reasonable belief that the information is true and correct.

I declare under penalty of perjury that the foregoing is true and correct.

Executed on April 5, 2024/s/ John N. Howard

Signature of individual signing on behalf of the debtor

John N. Howard

Printed name

Position or relationship to debtor President and Majority ShareholderAre additional pages to *Statement of Financial Affairs for Non-Individuals Filing for Bankruptcy* (Official Form 207) attached?

- ☒ No
☐ Yes

**United States Bankruptcy Court
District of Vermont**

In re **Join, Inc.**

Debtor(s)

Case No.

Chapter

7

DISCLOSURE OF COMPENSATION OF ATTORNEY FOR DEBTOR(S)

1. Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016(b), I certify that I am the attorney for the above named debtor(s) and that compensation paid to me within one year before the filing of the petition in bankruptcy, or agreed to be paid to me, for services rendered or to be rendered on behalf of the debtor(s) in contemplation of or in connection with the bankruptcy case is as follows:
- | | | |
|---|----|-----------------|
| For legal services, I have agreed to accept | \$ | 6,500.00 |
| Prior to the filing of this statement I have received | \$ | 6,500.00 |
| Balance Due | \$ | 0.00 |
2. \$ **338.00** of the filing fee has been paid.
3. The source of the compensation paid to me was:
- ☒ Debtor ☐ Other (specify):
4. The source of compensation to be paid to me is:
- ☒ Debtor ☐ Other (specify):
5. ☒ I have not agreed to share the above-disclosed compensation with any other person unless they are members and associates of my law firm.
- ☐ I have agreed to share the above-disclosed compensation with a person or persons who are not members or associates of my law firm. A copy of the agreement, together with a list of the names of the people sharing in the compensation is attached.
6. In return for the above-disclosed fee, I have agreed to render legal service for all aspects of the bankruptcy case, including:
- Analysis of the debtor's financial situation, and rendering advice to the debtor in determining whether to file a petition in bankruptcy;
 - Preparation and filing of any petition, schedules, statement of affairs and plan which may be required;
 - Representation of the debtor at the meeting of creditors and confirmation hearing, and any adjourned hearings thereof;
 - [Other provisions as needed]
Negotiations with secured creditors to reduce to market value; exemption planning; preparation and filing of reaffirmation agreements and applications as needed; preparation and filing of motions pursuant to 11 USC 522(f)(2)(A) for avoidance of liens on household goods.
7. By agreement with the debtor(s), the above-disclosed fee does not include the following service:
Representation of the debtors in any dischargeability actions, judicial lien avoidances, relief from stay actions or any other adversary proceeding.

CERTIFICATION

I certify that the foregoing is a complete statement of any agreement or arrangement for payment to me for representation of the debtor(s) in this bankruptcy proceeding.

April 5, 2024

Date

/s/ Michael B. Fisher

Michael B. Fisher

Signature of Attorney

Fisher Law Offices, PLLC

45 Lyme Road, Suite 205

Hanover, NH 03755

(603) 643-1313

fisher@mbfisherlaw.com

Name of law firm

**United States Bankruptcy Court
District of Vermont**

In re **Join, Inc.** Debtor(s) Case No. _____
Chapter **7**

VERIFICATION OF CREDITOR MATRIX

I, the President and Majority Shareholder of the corporation named as the debtor in this case, hereby verify that the attached list of creditors is true and correct to the best of my knowledge.

Date: **April 5, 2024**

/s/ John N. Howard
John N. Howard/President and Majority Shareholder
Signer/Title

Abigail E. Ferguson
39 Strong Street
Burlington, VT 05401

Acadia Insurance Company
One Acadia Commons
P.O. Box 9010
Westbrook, ME 04098-5010

American Express
P.O. Box 981537
El Paso, TX 79998

American Express
P.O. Box 981535
El Paso, TX 79998-1535

Charles N. Perkins and Janet B. Perkins
80 South Cove Road
Burlington, VT 05401

Charlotte Pusztai-Renold
169 Loomis Street
Burlington, VT 05401

Claire Generazio
9 Ritchie Avenue
Milton, VT 05468

Elizabeth K. Wright
17 Streeter Brook Road
Milton, VT 05468

Emily Hirauk
1 Fuller Place
Unit 309
Essex Junction, VT 05452

Internal Revenue Service
P.O. Box 7346
Philadelphia, PA 19101-7346

Internal Revenue Service
c/o United States Attorney
11 Elmwood Avenue, 3rd Floor
P.O. Box 570
Burlington, VT 05402

Jacqueline A. Lambert
1758 Reynolds Road
Saint Albans, VT 05478

John N. Howard
9 Green Dolphin Drive
South Burlington, VT 05403

John Wright
69 Howard Street
Unit 1
Burlington, VT 05401

Kinney Pike Insurance
1011 North Main Street
White River Junction, VT 05001

L & M Properties, LLC
105 Appletree Point Road
Burlington, VT 05408

Lanah A. Kelly
13704 Sunny Lane
Grand Haven, MI 49417

Maxim Roznerita
20 Shawmut Park
Newton Upper Falls, MA 02464

Meredith Lambert
1758 Reynolds Road
Saint Albans, VT 05478

Michael W. Deasy
1189 East Street
Mansfield, MA 02048

Morgan Kennedy
2 Autumn St. West
Worcester, MA 01603

Myers Container Services Corp.
P.O. Box 38
Winooski, VT 05404

Nick Savasta
9 Green Dolphin Drive
South Burlington, VT 05403

Nora R. Bodner
7 Handy Court
Burlington, VT 05405

Patrick B. Clear
21 Orchard Road
South Burlington, VT 05403

Reid S. Corliss
9 Roland Street
Medford, MA 02155

Renee E. Willard-Hunt
15 Cascade Way
Apartment 505
Winooski, VT 05404

Rose E. Friedlander
148 Sherwood Forest Road
Williston, VT 05495

Sonia Charmoy
75 Northwood Drive
Easton, CT 06612

Trevor M. Barr
39 Shepard Street
Winooski, VT 05404

U.S. Small Business Administration
409 3rd Street, SW
Washington, DC 20416

U.S. Small Business Administration
Office of Disaster Assistance
14925 Kingsport Road
Fort Worth, TX 76155

U.S. Small Business Administration
c/o United States Attorney
11 Elmwood Avenue, 3rd Floor
P.O. Box 570
Burlington, VT 05402

United Natural Food, Inc. (UNFI)
P.O. Box 419719
Boston, MA 02241-9719

Vermont Department of Labor
5 Green Mountain Drive
P.O. Box 488
Montpelier, VT 05601-0488

Vermont Department of Labor
c/o VT Attorney General
109 State Street
Montpelier, VT 05609-1001

Vermont Department of Liquor and Lottery
1311 US Route 302
Suite 100
Barre, VT 05641

Vermont Department of Liquor and Lottery
c/o VT Attorney General
109 State Street
Montpelier, VT 05609-1001

Vermont Department of Taxes
Bankruptcy Unit, 3rd Floor
109 State Street
P.O. Box 429
Montpelier, VT 05601-0429

VT Welcome Center Ad Sales Program
134 State St.
Montpelier, VT 05633

William P. Fogarty
14 Mayfair Street
South Burlington, VT 05403

Wynne R. Adamson
5 Scotsdale Road
South Burlington, VT 05403

Zoey A. Womick
623 Spring Meadows Drive
Ballwin, MO 63011

**United States Bankruptcy Court
District of Vermont**

In re **Join, Inc.**

Debtor(s)

Case No.

Chapter **7**

CORPORATE OWNERSHIP STATEMENT (RULE 7007.1)

Pursuant to Federal Rule of Bankruptcy Procedure 7007.1 and to enable the Judges to evaluate possible disqualification or recusal, the undersigned counsel for **Join, Inc.** in the above captioned action, certifies that the following is a (are) corporation(s), other than the debtor or a governmental unit, that directly or indirectly own(s) 10% or more of any class of the corporation's(s') equity interests, or states that there are no entities to report under FRBP 7007.1:

☒ None [*Check if applicable*]

April 5, 2024

Date

/s/ Michael B. Fisher

Michael B. Fisher

Signature of Attorney or Litigant

Counsel for **Join, Inc.**

Fisher Law Offices, PLLC

45 Lyme Road, Suite 205

Hanover, NH 03755

(603) 643-1313

fisher@mbfisherlaw.com